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AB-583 Death certificates. (2025-2026)



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## Assembly Bill No. 583

## CHAPTER 271

An act to amend, repeal, and add Sections 102795, 102800, 102825, 102850, 102875, 102975, and 103300 of the Health and Safety Code, relating to public health.

[Approved by Governor October 03, 2025. Filed with Secretary of State October 03, 2025.]

## LEGISLATIVE COUNSEL'S DIGEST

AB 583, Pellerin. Death certificates.

(1) Existing law requires that each death be registered with the local registrar of births and deaths in the district in which the death was officially pronounced or the body was found. Existing law establishes the required contents of the death certificate, including, but not limited to, the decedent's name, sex, race, and other relevant identifying and medical information. Existing law requires that the medical and health section data and the time of death be completed and attested to by the physician and surgeon last in attendance or, in the case of a patient in a skilled nursing or intermediate care facility, by the physician and surgeon last in attendance or by a licensed physician assistant meeting certain qualifications. Existing law also requires the individuals responsible for completing a death certificate to specify certain information on the certificate, including the time they last saw the deceased person alive. Existing law requires a physician and surgeon, physician assistant, or other specified individuals to immediately notify the coroner when they have knowledge of a death occurring under specified circumstances, including where suicide is suspected. A violation of that requirement is a crime.

This bill would, commencing July 1, 2026, additionally authorize the medical and health section data and the time of death on a death certificate to be completed and attested to by a nurse practitioner last in attendance. The bill would make conforming changes. Commencing July 1, 2026, the bill would also include a nurse practitioner to the group of individuals required to notify the coroner when they have knowledge of a death under certain specified circumstances. Because this bill would expand the application of an existing crime to nurse practitioners, this bill would impose a state-mandated local program.

(2) Existing law requires a funeral director, or a person acting in lieu of a funeral director if there is no funeral director, to prepare a certificate of fetal death and register it with the local registrar. Existing law requires the attending physician, if any, to state on the certificate of fetal death specific information, including the time and causes of fetal death. Existing law requires the physician, within 15 hours after the fetal death, to deposit the fetal death certificate at the place of death or deliver it to the attending funeral director or the office of the physician, as specified.

Commencing July 1, 2026, this bill would add a nurse practitioner in those provisions for purposes of preparing and depositing or delivering a certificate of fetal death.

(3) Existing law provides a procedure to, and authorizes a certifying physician or coroner to, amend a record of death, fetal death, or live birth with supplemental information by filing a declaration under penalty of perjury.

Commencing July 1, 2026, this bill would also authorize a nurse practitioner to use that procedure to file a declaration to amend a record of death, fetal death, or live birth. By expanding the scope of the crime of perjury, this bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority Appropriation: no Fiscal Committee: yes Local Program: yes

## THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

**SECTION 1.** Section 102795 of the Health and Safety Code is amended to read:

**102795.** (a) The medical and health section data and the time of death shall be completed and attested to by the physician and surgeon last in attendance, or in the case of a patient in a skilled nursing or intermediate care facility at the time of death, by the physician and surgeon last in attendance or by a licensed physician assistant under the supervision of the physician and surgeon last in attendance if the physician and surgeon or licensed physician assistant is legally authorized to certify and attest to these facts, and if the physician assistant has visited the patient within 72 hours of the patient's death. In the event the licensed physician assistant certifies the medical and health section data and the time of death, then the physician assistant shall also provide on the document the name of the last attending physician and surgeon and provide the coroner with a copy of the certificate of death. However, the medical health section data and the time of death shall be completed and attested to by the coroner in those cases in which they are required to complete the medical and health section data and certify and attest to these facts.

- (b) This section shall become inoperative on July 1, 2026, and, as of January 1, 2027, is repealed.
- SEC. 2. Section 102795 is added to the Health and Safety Code, to read:
- **102795.** (a) The medical and health section data and the time of death shall be completed and attested to by the physician and surgeon or nurse practitioner last in attendance.
- (b) In the case of a patient in a skilled nursing or intermediate care facility at the time of death, the medical and health section data and the time of death shall be completed and attested to by the physician and surgeon or nurse practitioner last in attendance or by a licensed physician assistant under the supervision of the physician and surgeon last in attendance if the physician and surgeon or licensed physician assistant is legally authorized to certify and attest to these facts and if the physician assistant has visited the patient within 72 hours of the patient's death. If the licensed physician assistant certifies the medical and health section data and the time of death, then the physician assistant shall also provide on the document the name of the last attending physician and surgeon and provide the coroner with a copy of the certificate of death. However, the medical health section data and the time of death shall be completed and attested to by the coroner in a case in which they are required to complete the medical and health section data and certify and attest to these facts.
- (c) This section shall become operative on July 1, 2026.
- SEC. 3. Section 102800 of the Health and Safety Code is amended to read:
- **102800.** (a) The medical and health section data and the physician's or coroner's certification shall be completed by the attending physician within 15 hours after the death, or by the coroner within three days after examination of the body.

The physician shall within 15 hours after the death deposit the certificate at the place of death, or deliver it to the attending funeral director at their place of business or at the office of the physician.

- (b) This section shall become inoperative on July 1, 2026, and, as of January 1, 2027, is repealed.
- **SEC. 4.** Section 102800 is added to the Health and Safety Code, to read:
- **102800.** (a) The medical and health section data and the physician's, nurse practitioner's, or coroner's certification shall be completed by the attending physician or nurse practitioner within 15 hours after the death or by the coroner within three days after examination of the body.
- (b) The physician or nurse practitioner shall, within 15 hours after the death, deposit the certificate at the place of death or deliver it to the attending funeral director at their place of business or at the office of the physician or nurse practitioner.

- (c) This section shall become operative on July 1, 2026.
- SEC. 5. Section 102825 of the Health and Safety Code is amended to read:
- **102825.** (a) The physician and surgeon last in attendance, or in the case of a patient in a skilled nursing or intermediate care facility at the time of death, the physician and surgeon last in attendance or a licensed physician assistant under the supervision of the physician and surgeon last in attendance, on a deceased person shall state on the certificate of death the disease or condition directly leading to death, antecedent causes, other significant conditions contributing to death and any other medical and health section data as may be required on the certificate; they shall also specify the time in attendance, the time they last saw the deceased person alive, and the hour and day on which death occurred, except in deaths required to be investigated by the coroner. The physician and surgeon or physician assistant shall specifically indicate the existence of any cancer as defined in subdivision (h) of Section 103885, of which the physician and surgeon or physician assistant has actual knowledge.
- (b) A physician and surgeon may designate, one or more other physicians and surgeons who have access to the physician and surgeon's records, to act as agent for the physician and surgeon for purposes of the performance of their duties under this section, provided that any person so designated acts in consultation with the physician and surgeon.
- (c) This section shall become inoperative on July 1, 2026, and, as of January 1, 2027, is repealed.
- **SEC. 6.** Section 102825 is added to the Health and Safety Code, to read:
- **102825.** (a) The physician and surgeon or nurse practitioner last in attendance, or in the case of a patient in a skilled nursing or intermediate care facility at the time of death, the physician and surgeon or nurse practitioner last in attendance or a licensed physician assistant under the supervision of the physician and surgeon last in attendance, on a deceased person shall state on the certificate of death the disease or condition directly leading to death, antecedent causes, other significant conditions contributing to death, and any other medical and health section data as may be required on the certificate.
- (b) The individuals identified in subdivision (a) shall also specify all of the following on the certificate:
  - (1) The time in attendance.
  - (2) The time they last saw the deceased person alive.
  - (3) The hour and day on which the death occurred, except in a death required to be investigated by the coroner.
- (c) The physician and surgeon, nurse practitioner, or physician assistant shall specifically indicate the existence of cancer, as defined in subdivision (h) of Section 103885, of which the physician and surgeon, nurse practitioner, or physician assistant has actual knowledge.
- (d) A physician and surgeon may designate one or more other physicians and surgeons who have access to the physician and surgeon's records to act as agent for the physician and surgeon for purposes of the performance of their duties under this section, provided that a person so designated acts in consultation with the physician and surgeon.
- (e) This section shall become operative on July 1, 2026.
- SEC. 7. Section 102850 of the Health and Safety Code is amended to read:
- **102850.** A physician and surgeon, physician assistant, funeral director, or other person shall immediately notify the coroner when they have knowledge of a death that occurred or has charge of a body in which death occurred under any of the following circumstances:
- (a) Without medical attendance.
- (b) During the continued absence of the attending physician and surgeon.
- (c) Where the attending physician and surgeon or the physician assistant is unable to state the cause of death.
- (d) Where suicide is suspected.
- (e) Following an injury or an accident.
- (f) Under circumstances as to afford a reasonable ground to suspect that the death was caused by the criminal act of another.
- A person who does not notify the coroner as required by this section is guilty of a misdemeanor.
- (g) This section shall become inoperative on July 1, 2026, and, as of January 1, 2027, is repealed.

- SEC. 8. Section 102850 is added to the Health and Safety Code, to read:
- **102850.** (a) A physician and surgeon, nurse practitioner, physician assistant, funeral director, or other person shall immediately notify the coroner if they have knowledge of a death that occurred or have charge of a body in which death occurred under any of the following circumstances:
  - (1) Without medical attendance.
  - (2) During the continued absence of the attending physician and surgeon.
  - (3) If the attending physician and surgeon, nurse practitioner, or the physician assistant is unable to state the cause of death.
  - (4) If suicide is suspected.
  - (5) Following an injury or an accident.
  - (6) Under circumstances as to afford a reasonable ground to suspect that the death was caused by the criminal act of another.
- (b) A person who does not notify the coroner as required by this section is guilty of a misdemeanor.
- (c) This section shall become operative on July 1, 2026.
- **SEC. 9.** Section 102875 of the Health and Safety Code is amended to read:
- 102875. The certificate of death shall be divided into two sections.
- (a) The first section shall contain those items necessary to establish the fact of the death, including all of the following and those other items as the State Registrar may designate:
  - (1) (A) Personal data of the decedent including full name, sex, color or race, marital status, name of spouse, date of birth and age at death, birthplace, usual residence, occupation and industry or business, and whether the decedent was ever in the Armed Forces of the United States.
    - (B) A person completing the certificate shall record the decedent's sex to reflect the decedent's gender identity as female, male, or nonbinary. The decedent's gender identity shall be reported by the informant, unless the person completing the certificate is presented with a birth certificate, a driver's license, a social security record, a court order approving a name or gender change, a passport, an advanced health care directive, or proof of clinical treatment for gender transition, in which case the person completing the certificate shall record the decedent's sex as that which corresponds to the decedent's gender identity as indicated in that document. If none of these documents are presented and the person with the right, or a majority of persons who have equal rights, to control the disposition of the remains pursuant to Section 7100 is in disagreement with the gender identity reported by the informant, the gender identity of the decedent recorded on the death certificate shall be as reported by that person or majority of persons.
    - (C) If a document specified in subparagraph (B) is not presented and a majority of persons who have equal rights to control the disposition of the remains pursuant to Section 7100 do not agree with the gender identity of the decedent as reported by the informant, any one of those persons may file a petition, in the superior court in the county in which the decedent resided at the time of the decedent's death, or in which the remains are located, naming as a party to the action those persons who otherwise have equal rights to control the disposition and seeking an order of the court determining, as appropriate, who among those parties shall determine the gender identity of the decedent.
    - (D) A person completing the death certificate in compliance with subparagraph (B) is not liable for any damages or costs arising from claims related to the sex of the decedent as entered on the certificate of death.
    - (E) A person completing the death certificate shall comply with the data and certification requirements described in Section 102800 by using the information available to the person prior to the deadlines for completion specified in that section.
  - (2) Date of death, including month, day, and year.
  - (3) Place of death.
  - (4) (A) Current first and middle names, birth last names, and the birthplaces of the parents, without reference to the parents' gendered relationship to the decedent.
    - (B) The State Registrar shall electronically capture the following information, which shall not be transcribed onto the actual hard copy of the death certificate:

- (i) The parents' relationship to the decedent.
- (ii) Any additional last names used by the parents, if any.
- (C) The State Registrar shall implement the changes made by the act that added this subparagraph no later than July 1, 2024.
- (5) Informant.
- (6) Disposition of body information, including signature and license number of embalmer, if the body is embalmed, or name of embalmer if affixed by attorney-in-fact; name of funeral director, or person acting as such; and date and place of interment or removal. Notwithstanding any other law, an electronic signature substitute, or some other indicator of authenticity, approved by the State Registrar may be used in lieu of the actual signature of the embalmer.
- (7) Certification and signature of attending physician and surgeon or certification and signature of coroner when required to act by law. Notwithstanding any other law, the person completing the portion of the certificate setting forth the cause of death may attest to its accuracy by use of an electronic signature substitute, or some other indicator of authenticity, approved by the State Registrar in lieu of a signature.
- (8) Date accepted for registration and signature of local registrar. Notwithstanding any other law, the local registrar may elect to use an electronic signature substitute, or some other indicator of authenticity, approved by the State Registrar in lieu of a signature.
- (b) The second section shall contain those items relating to medical and health data, including all of the following and other items as the State Registrar may designate:
  - (1) Disease or conditions leading directly to death and antecedent causes.
  - (2) Operations and major findings thereof.
  - (3) Accident and injury information.
  - (4) Information indicating whether the decedent was pregnant at the time of death, or within a year prior to the death, if known, as determined by observation, autopsy, or review of the medical record. The electronic death registration system shall capture additional information regarding the pregnancy status of the decedent consistent with the data elements on the U.S. Standard Certificate of Death. This paragraph shall not be interpreted to require the performance of a pregnancy test on a decedent, or to require a review of medical records in order to determine pregnancy.
- (c) This section shall become inoperative on July 1, 2026, and, as of January 1, 2027, is repealed.
- **SEC. 10.** Section 102875 is added to the Health and Safety Code, to read:

102875. The certificate of death shall be divided into two sections:

- (a) The first section shall contain those items necessary to establish the fact of the death, including all of the following and those other items as the State Registrar may designate:
  - (1) (A) Personal data of the decedent including full name, sex, color or race, marital status, name of spouse, date of birth and age at death, birthplace, usual residence, occupation and industry or business, and whether the decedent was ever in the Armed Forces of the United States.
    - (B) A person completing the certificate shall record the decedent's sex to reflect the decedent's gender identity as female, male, or nonbinary. The decedent's gender identity shall be reported by the informant, unless the person completing the certificate is presented with a birth certificate, a driver's license, a social security record, a court order approving a name or gender change, a passport, an advanced health care directive, or proof of clinical treatment for gender transition, in which case the person completing the certificate shall record the decedent's sex as that which corresponds to the decedent's gender identity as indicated in that document. If none of these documents are presented and the person with the right, or a majority of persons who have equal rights, to control the disposition of the remains pursuant to Section 7100 is in disagreement with the gender identity reported by the informant, the gender identity of the decedent recorded on the death certificate shall be as reported by that person or majority of persons.
    - (C) If a document specified in subparagraph (B) is not presented and a majority of persons who have equal rights to control the disposition of the remains pursuant to Section 7100 do not agree with the gender identity of the decedent as reported by the informant, any one of those persons may file a petition, in the superior court in the county in which the decedent resided at the time of the decedent's death, or in which the remains are located, naming as a party to the action those persons who

otherwise have equal rights to control the disposition and seeking an order of the court determining, as appropriate, who among those parties shall determine the gender identity of the decedent.

- (D) A person completing the death certificate in compliance with subparagraph (B) is not liable for any damages or costs arising from claims related to the sex of the decedent as entered on the certificate of death.
- (E) A person completing the death certificate shall comply with the data and certification requirements described in Section 102800 by using the information available to the person prior to the deadlines for completion specified in that section.
- (2) Date of death, including month, day, and year.
- (3) Place of death.
- (4) (A) Current first and middle names, birth last names, and the birthplaces of the parents, without reference to the parents' gendered relationship to the decedent.
  - (B) The State Registrar shall electronically capture the following information, which shall not be transcribed onto the actual hard copy of the death certificate:
    - (i) The parents' relationship to the decedent.
    - (ii) Additional last names used by the parents, if any.
  - (C) The State Registrar shall implement the changes made by the act that added this subparagraph no later than July 1, 2024.
- (5) Informant.
- (6) Disposition of body information, including signature and license number of embalmer, if the body is embalmed, or name of embalmer if affixed by attorney-in-fact; name of funeral director, or person acting as such; and date and place of interment or removal. Notwithstanding any other law, an electronic signature substitute, or some other indicator of authenticity, approved by the State Registrar may be used in lieu of the actual signature of the embalmer.
- (7) Certification and signature of attending physician and surgeon or nurse practitioner or certification and signature of coroner when required to act by law. Notwithstanding any other law, the person completing the portion of the certificate setting forth the cause of death may attest to its accuracy by use of an electronic signature substitute, or some other indicator of authenticity, approved by the State Registrar in lieu of a signature.
- (8) Date accepted for registration and signature of local registrar. Notwithstanding any other law, the local registrar may elect to use an electronic signature substitute, or some other indicator of authenticity, approved by the State Registrar in lieu of a signature.
- (b) The second section shall contain those items relating to medical and health data, including all of the following and other items as the State Registrar may designate:
  - (1) Disease or conditions leading directly to death and antecedent causes.
  - (2) Operations and major findings thereof.
  - (3) Accident and injury information.
  - (4) Information indicating whether the decedent was pregnant at the time of death, or within a year prior to the death, if known, as determined by observation, autopsy, or review of the medical record. The electronic death registration system shall capture additional information regarding the pregnancy status of the decedent consistent with the data elements on the U.S. Standard Certificate of Death. This paragraph shall not be interpreted to require the performance of a pregnancy test on a decedent, or to require a review of medical records in order to determine pregnancy.
- (c) This section shall become operative on July 1, 2026.
- SEC. 11. Section 102975 of the Health and Safety Code is amended to read:
- **102975.** (a) The physician, if any, in attendance on the delivery of a fetus shall within 15 hours after the delivery state on the certificate of fetal death the time of fetal death or delivery, the direct causes of the fetal death, the conditions, if any, that gave rise to these causes, and other medical and health section data as may be required on the certificate, and shall sign the certificate in attest to these facts.

The physician shall within 15 hours after the death deposit the certificate at the place of death, or deliver it to the attending funeral director at their place of business or at the office of the physician.

- (b) This section shall become inoperative on July 1, 2026, and, as of January 1, 2027, is repealed.
- SEC. 12. Section 102975 is added to the Health and Safety Code, to read:
- **102975.** (a) The physician or nurse practitioner, if any, in attendance on the delivery of a fetus shall, within 15 hours after the delivery, state on the certificate of fetal death the time of fetal death or delivery, the direct causes of the fetal death, the conditions, if any, that gave rise to these causes, and other medical and health section data as may be required on the certificate and shall sign the certificate in attest to these facts.
- (b) The physician or nurse practitioner shall, within 15 hours after the death, deposit the certificate at the place of death, deliver it to the attending funeral director at their place of business, or deliver it to the office of the physician or nurse practitioner.
- (c) This section shall become operative on July 1, 2026.
- SEC. 13. Section 103300 of the Health and Safety Code is amended to read:
- **103300.** (a) Notwithstanding other provisions in this part relative to amendment of records, whenever the information originally furnished in the medical and health data section of any record of death, fetal death or live birth is modified by supplemental information relative thereto, the certifying physician or coroner having knowledge of this information may make a declaration as provided in Section 2015.5 of the Code of Civil Procedure stating the changes necessary to make the information correct and file it with the state or local registrar.
- (b) This section shall become inoperative on July 1, 2026, and, as of January 1, 2027, is repealed.
- **SEC. 14.** Section 103300 is added to the Health and Safety Code, to read:
- **103300.** (a) Notwithstanding other provisions in this part relative to amendment of a record, if the information originally furnished in the medical and health data section of a record of death, fetal death, or live birth is modified by supplemental information relative thereto, the certifying physician, nurse practitioner, or coroner having knowledge of this information may make a declaration, as provided in Section 2015.5 of the Code of Civil Procedure, stating the changes are necessary to make the information correct and file the declaration with the state or local registrar.
- (b) This section shall become operative on July 1, 2026.
- **SEC. 15.** No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.